

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.B.	20205	8-3-98
O.I.P.E. CLASSIFIER	Q		5 9-3-99
FORMALITY REVIEW		71531	9-10-99

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 : ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	9-16-82
Original	13-17-85
1	1-1-86
2	1-1-86
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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